

# Proof of Sponsorship

Date: \_\_\_\_\_

## Sponsor's Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Beneficiary's Information

Name: \_\_\_\_\_

Relationship to Sponsor: \_\_\_\_\_

Address: \_\_\_\_\_

## Sponsorship Details

I hereby certify that I am willing and financially able to sponsor the above-named beneficiary, and ensure their support during their stay in \_\_\_\_\_.

Signature of Sponsor:

\_\_\_\_\_

Date: \_\_\_\_\_